CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

(month. day, year)

STATEMENT OF ECONOMIC INTERESTS RECEIVED COVER PAGE PRACTICES COMMISSION

Please type or print in ink.	AMENDMENT	2012 APR 10 AM 11.50
NAME OF FILER (LAST) Fuller	(FIRST) Jean(nie)	(WIDPTE) . 75
1. Office, Agency, or Court		
Agency Name		
State Senate	· · · · · · · · · · · · · · · · · · ·	
Division, Board, Department, District, if applicable	Your Position	
18th	Senator	
► If filing for multiple positions, list below or on an attachment	ent	
Agency:	Position:	
2. Jurisdiction of Office (Check at least one box)	· · · · · · · · · · · · · · · · · · ·	
State ∴	Judge or Court	Commissioner (Statewide Jurisdiction)
Multi-County	County of	
City of		
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2011, throug December 31, 2011.	h Leaving Office (Check one)	e: Date Left/
The period covered is/	, through O The period leaving office	covered is January 1, 2011, through the date of ce.
Assuming Office: Date assumed//		covered is/, through leaving office.
Candidate: Election Year Office	ce sought, if different than Part 1:	
4. Schedule Summary	T-t-1	2
Check applicable schedules or "None."	► lotal number of pages i	including this cover page:2
Schedule A-1 - Investments – schedule attached	Schedule C - Income	e, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments - schedule attached	-	e - Gifts - schedule attached
Schedule B · Real Property – schedule attached	Schedule E - Income	e - Gifts - Travel Payments - schedule attached
□ Name Alo	-Or-	·
ı nave used alı reasonable diligence in preparing this statemer	r. I nave reviewed	
herein and in any attached schedules is true and complete.	acknowledge this	
I certify under penalty of perjury under the laws of the St	ate of California t	
4.0.0040		
Date Signed 4-9-2012	Signa	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

Please type or print in ink.

RECENTATEMENT OF ECONOMIC INTERESTS AIR POLITICAL TICES COMMISSION COVER PAGE

Date Received Official Use Only

MAR – 1 2012 **N**

NAME OF FILER	2012 (LAST)	(FIRST)	Despriments of (MIDDLE)
Fuller	· · · · · · · · · · · · · · · · · · ·	Jean(nie)	Lynn
1. Office, Agency, or Co	urt		
Agency Name			
California State Senate	· ·		
Division, Board, Department, D	District, if applicable	Your Position	
District 18		Senator	
► If filing for multiple position	s, list below or on an attachment.		
Agency;		Position:	
2. Jurisdiction of Office	(Check at least one box)		· · · · · · · · · · · · · · · · · · ·
State		☐ Judge or Court Comm	nissioner (Statewide Jurisdiction)
Multi-County		County of	· · · · · · · · · · · · · · · · · · ·
		•	
, , , , , , , , , , , , , , , , , , ,		- Land C 11(3)	
3. Type of Statement (c)	neck at least one box)		
	red is January 1, 2011, through		e Left
December 31, 2 -or-		(Check one)	
The period cove December 31, 20	red is/, thr 011.	rough O The period covers leaving office.	ed is January 1, 2011, through the date of
Assuming Office: Date a	assumed/	The period covere the date of leaving	ed is, through g office.
Candidate: Election Year	Office sough	ht, if different than Part 1:	
4. Schedule Summary			
Check applicable schedules	or "None."	Total number of pages include	ding this cover page:
Schedule A-1 - Investmen	ts - schedule attached	Schedule C - Income, Loai	ns, & Business Positions – schedule attached
Schedule A-2 - Investmen		Schedule D - Income - Gi	fts schedule attached
Schedule B - Real Proper	ty - schedule attached	Schedule E - Income - Gil	fs - Travel Payments - schedule attached
	-or- None - <i>No reportabl</i>	le interests on any schedule	
. Verification	· · · · · · · · · · · · · · · · · · ·		
(c)(1)			
			est of my knowledge the information contained
•	edules is true and complete. I acknow	() () (
I certify under penalty of perj	ury under the laws of the State of C	Calif	
Date Stuffed	ch 1, 2012 nih, day, year)		

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jean(nie) Fuller

► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Woodbridge Apartments	
Name 43920 & 43950 Bobby Jones Drive Lancaster CA Address (Business Address Acceptable) Check one	Name Address (Business Address Acceptable) Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship X Partnership Other YOUR BUSINESS POSITION Partner	NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499	\$10,001 - \$100,000 \$500 - \$1,000 S1,000 OVER \$100,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
No one partner receives more than \$10,000 of income from a single tenant	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box: ☐ INVESTMENT ☐ REAL PROPERTY	Check one box: INVESTMENT REAL PROPERTY
Woodbridge Apartments	·
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
43920 & 43950 Bobby Jones Drive Lancaster CA 93536	·
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / 11 / 11 11 11 11	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Yrs, remaining Check box if additional schedules reporting investments or real property are attached
Comments: Rental Apartments	EPPC Form 700 (2011/2012) Sch. A-2

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name Jean(nie) Fuller

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
ATN # 425-020-05-00-8	ATN #425-020-04-00-5
CITY	CITY
Lake Isabella CA	Lake Isabella CA
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / 11 / 1
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold	Leasehold X 1/2 Interest Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$1,001 - \$10,000 \$1,001 - \$10,000	\$50 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source income of \$10,000 or more.
	l
business on terms available to members of the public loans received not in a lender's regular course of busin	
business on terms available to members of the public	without regard to your official status. Personal loans and
business on terms available to members of the public loans received not in a lender's regular course of busin	without regard to your official status. Personal loans and ness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of business of Lender*	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER*
business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable)	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
business on terms available to members of the public loans received not in a lender's regular course of business NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) None	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER*
business on terms available to members of the public loans received not in a lender's regular course of business NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) None	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)

CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISSION	0
Name	
Jean(nie) Fuller	_

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
201 Aviation St. AP 091-040-2	ATN #425-020-03-00-2
CITY	CITY
Shafter, CA	Lake Isabella CA
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold X/2 Interest Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
<u> </u>	
· · · · · · · · · · · · · · · · · · ·	
* You are not required to report loans from commercial l business on terms available to members of the public loans received not in a lender's regular course of business.	ending institutions made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
S500 - \$1,000 S1,001 - \$10,000	☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	[
Guaranioi, ii applicable	Guarantor, if applicable
Очаганот, п аррисаме	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jean(nie) Fuller

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS APN # 3240-002-002	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS Parcel # 183-0-100-515
CITY	CITY
Lancaster CA	Oxnard, CA
FAIR MARKET VALUE \$ \$2,000 - \$10,000 \$ \$10,001 - \$100,000 \$ \$1,000,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / 11
NATURE OF INTEREST	NATURE OF INTEREST
✓ Ownership/Deed of Trust ✓ Easement	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
\$10,001 - \$100,000 DVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	
	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
INTEREST RATE TERM (Months/Years) % None	
%	INTEREST RATE TERM (Months/Years)%
HIGHEST BALANCE DURING REPORTING PERIOD	INTEREST RATE TERM (Months/Years) ———————————————————————————————————
	INTEREST RATE TERM (Months/Years) ———————————————————————————————————
	INTEREST RATE TERM (Months/Years) ———————————————————————————————————
% None	INTEREST RATE TERM (Months/Years) ———————————————————————————————————
	INTEREST RATE TERM (Months/Years) ———————————————————————————————————

CALIFORNIA FORM	
Name	
Jean(nie) Fuller	

Aviation Street After CA MARKET VALUE
MARKET VALUE IF APPLICABLE, LIST DATE: 2,000 - \$10,000 10,001 - \$1,000,000 ACQUIRED DISPOSE
MARKET VALUE IF APPLICABLE, LIST DATE: 2,000 - \$10,000 10,001 - \$1,000,000 ACQUIRED DISPOSE
RE OF INTEREST
wnership/Deed of Trust Easement
Leasehold Other
NTAL PROPERTY, GROSS INCOME RECEIVED
- \$499
0,001 - \$100,000 OVER \$100,000
CES OF RENTAL INCOME: If you own a 10% or greater st, list the name of each tenant that is a single source ne of \$10,000 or more.
ard to your official status. Personal loans and be disclosed as follows:
ard to your official status. Personal loans and be disclosed as follows: OF LENDER*
ard to your official status. Personal loans and be disclosed as follows: OF LENDER* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER
ard to your official status. Personal loans and be disclosed as follows: OF LENDER* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER EST RATE TERM (Months/Years)
ard to your official status. Personal loans and be disclosed as follows: OF LENDER* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER
ard to your official status. Personal loans and be disclosed as follows: OF LENDER* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER EST RATE TERM (Months/Years)
OF LENDER* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER EST RATE TERM (Months/Years) %
ard to your official status. Personal loans and be disclosed as follows: OF LENDER* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER EST RATE TERM (Months/Years) ———————————————————————————————————
E \$1

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jean(nie) Fuller

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 188-0-300-275	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 188-0-245-085
	OUTV
Oxnard CA	Oxnard CA
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST NATURE OF INTEREST □ Description: □ Easement
✓ Ownership/Deed of Trust ☐ Easement	Ownership/Deed of Trust Easement
Leasehold	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
□ \$0 - \$499 □ \$500 - \$1,000 □ \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000	■ \$10,001 - \$100,000 □ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Robert Boelts	Peter Berger
	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	5500 - \$1,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
Comments:	

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

NAME OF SOURCE Vernon Chamber of Commerce ADDRESS (Business Actives Acceptable) 3801 S. Sante Fe Ave Vernon BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mindddyy) VALUE DESCRIPTION OF GIFT(S) 8 / 16 / 11					
ADDRESS (Business Address Acceptable) 3801 S. Sante Fe Ave Vernon BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 8 / 16 / 11	► NAME OF SOURCE		► NAME OF SOURCE	E	
3801 S. Sante Fe Ave Vernon BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 8 / 16 / 11	Vernon Chamber of Commerce		Nickel Family LLC		
BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 8 / 16 / 11	ADDRESS (Business Address Acceptable	,)			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 8	3801 S. Sante Fe Ave Vernon		15701 Highw	ay 178 Bakerst	field CA
8 /16 / 11 s 48.00 Sample of Goods	BUSINESS ACTIVITY, IF ANY, OF SOUR	CE	BUSINESS ACTIVI	TY, IF ANY, OF SOL	IRCE
8 /16 / 11 s 48.00 Sample of Goods					
NAME OF SOURCE Del Mar Thoroughbred Club ADDRESS (Business Address Acceptable) P.O. Box 700 Del Mar BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) ADDRESS (Business Address Acceptable) 1215 K street Sacramento BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) ADDRESS (Business Address Acceptable) 174 Main Street Bishop CA BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 100 Nicollet Mall Minneapolis MN BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 100 Nicollet Mall Minneapolis MN BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 5 18 11 \$ 7.50 Target Tote	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
NAME OF SOURCE Del Mar Thoroughbred Club ADDRESS (Business Address Acceptable) P.O. Box 700 Del Mar BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 1215 K street Sacramento BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE Randy Gillespie ADDRESS (Business Address Acceptable) 1215 K street Sacramento BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE Target ADDRESS (Business Address Acceptable) 100 Nicollet Mall Minneapolis MN BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 s 120 Book, DVD, photo 1 1 2 1 2 3 5 5 1 1 s 7.50 Target Tote 1 1 1 1 s 7.50 Target Tote	8 / 16 / 11 _{\$} 48.00	Sample of Goods	6 , 29 , 11.	ş <u> </u>	Map of Sacramento
NAME OF SOURCE Del Mar Thoroughbred Club ADDRESS (Business Address Acceptable) P.O. Box 700 Del Mar BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 1215 K street Sacramento BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE Randy Gillespie ADDRESS (Business Address Acceptable) 1215 K street Sacramento BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE Target ADDRESS (Business Address Acceptable) 100 Nicollet Mall Minneapolis MN BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 s 120 Book, DVD, photo 1 1 2 1 2 3 5 5 1 1 s 7.50 Target Tote 1 1 1 1 s 7.50 Target Tote	\$,		\$	
Del Mar Thoroughbred Club ADDRESS (Business Address Acceptable) P.O. Box 700 Del Mar BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 7 / 21 / 11 \$ 255 Admission and club NAME OF SOURCE Randy Gillespie ADDRESS (Business Address Acceptable) 174 Main Street Bishop CA BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) To Name Of Source DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) Target ADDRESS (Business Address Acceptable) 100 Nicollet Mall Minneapolis MN BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 5 / 18 / 11 \$ 7.50 Target Tote	· \$			\$	
ADDRESS (Business Address Acceptable) P.O. Box 700 Del Mar BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 7 / 21 / 11 \$ 255 Admission and club	NAME OF SOURCE		► NAME OF SOURC		
P.O. Box 700 Del Mar BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 7 / 21 / 11 \$ 255 Admission and club	Del Mar Thoroughbred Club		Cal Chamber		
BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 7 / 21 / 11 \$ 255 Admission and club	ADDRESS (Business Address Acceptable,)	ADDRESS (Busines	s Address Acceptab	le)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 7 / 21 / 11 \$ 255 Admission and club 6 / 15 / 11 \$ 189.72 Business summit lunch 6 / 15 / 11 \$ 189.72 Business summit lunch 1	P.O. Box 700 Del Mar		1215 K street	Sacramento	
Admission and club 6 / 15 / 11 \$ 189.72 Business summit lunch 10 Nicollet Mall Minneapolis MN 8 Business Activity, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 5 / 18 / 11 \$ 7.50 Target Tote 10 / 1 \$ \$ 190.70 Summit lunch	BUSINESS ACTIVITY, IF ANY, OF SOUR	CE	BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE
MAME OF SOURCE Randy Gillespie ADDRESS (Business Address Acceptable) 174 Main Street Bishop CA BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 \$ 120 Book, DVD, photo Mall Minneapolis MN Business Activity, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 5 / 18 / 11 \$ 7.50 Target Tote Mall Minneapolis MN Business Activity, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 5 / 18 / 11 \$ 7.50 Target Tote Mall Minneapolis MN Business Acteptable DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 5 / 18 / 11 \$ 7.50 Target Tote Mall Minneapolis MN Business Acteptable DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 5 / 18 / 11 \$ 7.50 Target Tote	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Randy Gillespie ADDRESS (Business Address Acceptable) 174 Main Street Bishop CA BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 \$ 120 Book, DVD, photo DATE (mm/dd/yy) \$ 7.50 Target Tote	7 / 21 / 11 \$ 255	Admission and club	6 , 15 , 11	\$ <u>189.72</u>	Business summit lunch
Randy Gillespie ADDRESS (Business Address Acceptable) 174 Main Street Bishop CA BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 \$ 120 Book, DVD, photo DATE (mm/dd/yy) \$ 7.50 Target Tote	s			\$	
Randy Gillespie ADDRESS (Business Address Acceptable) 174 Main Street Bishop CA BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 \$ 120 Book, DVD, photo DATE (mm/dd/yy) \$ 7.50 Target Tote				\$	
ADDRESS (Business Address Acceptable) 174 Main Street Bishop CA BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 s 120 Book, DVD, photo	NAME OF SOURCE		► NAME OF SOURCE	=	
174 Main Street Bishop CA BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 s 120 Book, DVD, photo	Randy Gillespie		Target		
BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 s 120 Book, DVD, photo 5 / 18 / 11 s 7.50 Target Tote	ADDRESS (Business Address Acceptable)		ADDRESS (Busines	s Address Acceptab	le)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6 / 7 / 11 s 120 Book, DVD, photo 5 / 18 / 11 s 7.50 Target Tote // s // s // s // s	174 Main Street Bishop CA	,	100 Nicollet M	lall Minneapolis	s MN
6 / 7 / 11 s 120 Book, DVD, photo 5 / 18 / 11 s 7.50 Target Tote	BUSINESS ACTIVITY, IF ANY, OF SOURCE	Æ	BUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE
	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	6 / 7 / 11 \$ 120	Book, DVD, photo	5 / 18 / 11	ş <u>7.50</u>	Target Tote
	\$		·	\$	
	\$			\$	
		•			
Comments:	Comments:				

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

· · ·	
► NAME OF SOURCE	► NAME OF SOURCE
California Automatic Vendors Council	John Harris
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
80 S. lake Ave Ste 538 Pasedena	23300 West Oakland Ave. Coalinga CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
5 / 10 / 11 _{\$} 20 Gift Bag	7 , 1 , 11 _{\$} 33.98 Steaks
	\$
NAME OF SOURCE	► NAME OF SOURCE
California Citrus Mutual BOD	Civil Justice Association of California
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
512 North Kaweah Ave. Exeter CA	1201 K Street Ste 1850 Sacramento CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
4 / 26 / 11 _{\$} 78.95 <u>Dinner</u>	4 / 4 / 11 s 48.65 Gift basket
\$ · ·	\$
	\$
NAME OF SOURCE	► NAME OF SOURCE
Napa Valley Vintners	California Cattlemen's Association
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
P.O. Box 141 St. Helena CA	1221 H Street Sacramento CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
<u>4 / 5 / 11</u> _{\$} 13.13 Gift	3 / 23 / 11 s 45 Breakfast and Hat
	\$
	\$
Comments:	

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Jean(nie) Fuller

▶ NAME OF SOURCE	▶ NAME OF SOURCE
Assoc. of Regional Center Agencies	The California Nevada Soft Drink Assoc.
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
915 L Street Ste. 1440 Sacramento CA	1 Capitol Mall #320 Sacramento CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
position not gother	BOOMEDS ACTIVITY, II ART, OF COOKE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
3 / 16 / 11 _s 5 Plant	
	\$
► NAME OF SOURCE	► NAME OF SOURCE
Assoc. of California Water Agencies	California Citrus Mutual BOD
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
910 K Street Ste 100 Sacramento CA	512 North Kaweah Avenue Exeter CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
3 / 16 / 11 _{\$} 38.82 Gift Basket	2 <u> </u>
	- J/ \$
► NAME OF SOURCE	► NAME OF SOURCE
California Rice Commission	International Agri Center
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
8801 Folsom Blvd. Ste 172 Sacramento CA	4500 S. Laspina Street Tulare CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
3 / 14 / 11 \$ 32.89 Gift Basket of Rice	2 / 8 / 11 s 50 Gift basket of ag
<u> </u>	2 / 8 / 11 s 50 Gift basket of ag
	\$
Comments:	

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

NAME OF SOUR	CE		► NAME OF SOURCE						
PXP ADDRESS (Business Address Acceptable) 1200 Discovery Drive Ste 500 Bakersfield		Dick Noles, APPL ADDRESS (Business Address Acceptable) 3566 Brookside Drive Bishop CA							
					BUSINESS ACTIV	ITY, IF ANY, OF SOL	JRCE	BUSINESS ACTIVITY, IF ANY, OF SO	DURCE
					DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
12 / 6 / 11	\$23.70	Gift Basket	10,13,11 \$ 60.00	Flowers					
	\$		\$						
	\$		\$						
NAME OF SOURCE	E		➤ NAME OF SOURCE						
CIPA			California Grape and Tree						
•	ss Address Acceptat	ole)	ADDRESS (Business Address Accepted)						
1001 K street	Sacramento		978 West Alluvial, Fresno (
BUSINESS ACTIVI	TY, IF ANY, OF SOL	JRCE	BUSINESS ACTIVITY, IF ANY, OF SC	URCE					
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)					
11 / 30 / 11	\$ <u>219.25</u>	Dinner	8 / 25 / 11 \$ 15	Fruit					
/	\$		\$						
	\$		\$	· · · · · · · · · · · · · · · · · · ·					
NAME OF SOURC	Е		► NAME OF SOURCE						
Teison Ranch	Company		California Outdoor Heritage	Alliance					
ADDRESS (Busines	ss Address Acceptab	le)	ADDRESS (Business Address Accepta	ible)					
1121 L Street	Sacramento		1600 Sacramento Inn Way, Sacramento CA						
BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE	BUSINESS ACTIVITY, IF ANY, OF SO	URCE					
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)					
10 / 24 / 11	\$275	Quail Hunt & meals	8 / 23 / 11 \$ 12.25	Shooting Trap					
	\$		\$	 =					
	\$		\$						

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

NAME OF SOURCE	NAME OF SOURCE		
California Healthcare Institute	American Council of Engineering Companies		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
888 Prospect Street Ste. 220 La Jolla CA	1303 J Street Ste 450 Sacramento CA		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
•			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
2 / 1 / 11	2 / 1 / 11 s 122.58 Dinner		
➤ NAME OF SOURCE	▶ NAME OF SOURCE		
Agricultural Leadership Foundation	San Joaquin Commismity Hospital		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
P.O. Box 479 Salinas CA	2615 Chester Avenue Bakersfield		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
1 / 26 / 11 _{\$} 53 Food	12 / 15 / 11 _{\$} 75 writing pad		
	\$		
► NAME OF SOURCE	► NAME OF SOURCE		
California Prolife Council	Grimmway Farms		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
2306 J Street Ste 200 Sacramento CA	Bakersfield CA		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
1 / 26 / 11 _{\$} 1 Candy Bar	12 / 15 / 11 s 15 Oranges		
*	<u></u> \$		
\$			
	•		
Comments:			

CALIFORNIA FORM	
Name	
Jean(nie) Fuller	

► NAME OF SOURCE		► NAME OF SOURCE
Hall Ambulance		·
ADDRESS (Business Address	Acceptable)	ADDRESS (Business Address Acceptable)
1001 21st Street Bak	ersfield CA	
BUSINESS ACTIVITY, IF ANY	, OF SOURCE .	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
12 / 15 / 11 \$	40 plant	<u> </u>
	· · · · · · · · · · · · · · · · · · ·	
► NAME OF SOURCE		► NAME OF SOURCE
Paramount Farming		
ADDRESS (Business Address	Acceptable)	ADDRESS (Business Address Acceptable)
33141 Lardo Highway	y Bakersfield CA	·
BUSINESS ACTIVITY, IF ANY,	OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
12 / 15 / 11 \$	40 Nuts	/ \$
/		
► NAME OF SOURCE		► NAME OF SOURCE
Teron Ranch Compa		
ADDRESS (Business Address	Acceptable)	ADDRESS (Business Address Acceptable)
1121 Street Sacrame	ento CA	_
BUSINESS ACTIVITY, IF ANY,	OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
<u>11 / 24 / 11</u> §	50 Dinner	
	· · · · · · · · · · · · · · · · · · ·	
		_ *
Comments:		· · · · · · · · · · · · · · · · · · ·

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

► NAME OF SOURCE		► NAME OF SOURCE
California Independent Petro	leum Association	· ·
ADDRESS (Business Address Acceptable)		ADDRESS (Business Address Acceptable)
1001 K Street Sacramento C	A 95814	
BUSINESS ACTIVITY, IF ANY, OF SOUI	RCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
11,30,11 \$ 219.25	Dinner	- J
\$	· · · · · · · · · · · · · · · · · · ·	\$
\$		\$
NAME OF SOURCE		▶ NAME OF SOURCE
ADDRESS (Business Address Acceptable	e)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOUR	RCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
\$		\$
	·	\$
		\$
NAME OF SOURCE		Filer's Verification
ADDRESS (Business Address Acceptable	»)	Print Name Jean Fuller Office, Agency or Court Senate 18th District
BUSINESS ACTIVITY, IF ANY, OF SOUR	CE	or Court Seriate Total District Statement Type 2011/2012 Annual Assuming Leaving
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	☐ (yr) Annual ☐ Candidate
		I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.
\$		I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
\$ ·		Date Signed 4-9-2012
		Filer's Signa

Comments: Spelled out the Name for CIPA.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received
STS RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION

AMENDMENT

Please type or print in	n ink.	WINEINDIAIEIN I	2012 APR ID AMILES
NAME OF FILER	(LAST) (TM)	(FIRST)	(WIDPFF) . J.C
Fuller		Jean(nie)	
1. Office, Agency	, or Court		
Agency Name			,
State Senate			·
•	partment, District, if applicable	Your Position	
18th		Senator	
▶ If filing for multip	le positions, list below or on an attachment.	,	
Agency:		Position:	
2. Jurisdiction o	f Office (Check at least one box)	· · · · · · · · · · · · · · · · · · ·	
State	·	☐ Judge or Court Com	missioner (Statewide Jurisdiction)
Multi-County		County of	4,
	• 		
	ment (Check at least one box)		
	eriod covered is January 1, 2011, through nber 31, 2011.	☐ Leaving Office: Do (Check one)	ate Left/
-or- The p	eriod covered is/		ered is January 1, 2011, through the date of
Assuming Office	ce: Date assumed/	O The period cover the date of leaver	ered is, through ing office.
Candidate: Ele	ection Year Office s	ought, if different than Part 1:	
4. Schedule Sum			
Check applicable s	chedules or "None."	► Total number of pages inclu	iding this cover page:
	Investments - schedule attached		ans, & Business Positions – schedule attache
	Investments – schedule attached Peal Property – schedule attached	Schedule D - Income - C	Gifts - schedule attached Gifts - Travel Payments - schedule attached
Schedule B • A	•		onis – Haver Payments – schedule attached
	-0: None - No repo	rtable interests on any schedule	
. Verification			
(c)(1)			
	nable diligence in preparing this statement. I ached schedules is true and complete. I ad		pest of my knowledge the information contains
	Ity of perjury under the laws of the State		
٠	4-9-2012		
Date Signed	4-9-2012 (month, day, year)	9	
	(money 40), Jean		